

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>1-11-17</i>	<i>20</i>	<i>07-14-07/25</i>
FORMALITY REVIEW	<i>RC</i>	<i>1080</i>	<i>8-24-01</i>
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	<i>07/11/01</i>
2	<i>07/11/01</i>
3	<i>07/11/01</i>
4	<i>07/11/01</i>
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Claim	Date
Final Original	
51	<i>07/11/01</i>
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Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
 staple additional sheet here

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**BEST AVAILABLE COPY**

*1034*  
*8/24*